

Kenya

COUNTRY:
Kenya

USAID FUNDING PERIOD:
August 2000-March 2003

PROJECT:
Speak for the Child

USAID AMOUNT:
\$530,340

IMPLEMENTING ORGANIZATIONS:
Academy for Educational Development/
Ready to Learn Center and Pathfinder
International

PURPOSE

Ready to Learn works with nongovernmental organizations and community-based organizations to improve the care of orphans and other vulnerable children under the age of 5. The project has four stages:

- A child development team is working to develop a model and to sponsor exchange visits and training events for caregivers.
- In South Kabras, Ready to Learn is sponsoring a child-oriented needs appraisal in order to form a model program of care for vulnerable young children.
- The project is identifying at least four model sites for expanded community-based programs, emphasizing local capacity building and technical assistance.
- Information on effective models, tools, and strategies to address the physical and psychosocial situation of young children will be disseminated through videos, policy briefs, manuals, and reports.

KEY ACCOMPLISHMENTS

- A survey tool for rapid and transparent identification of most vulnerable households with children under 5 was tested and data were collected for 837 households.
- A home-visiting program was implemented in the first community.
- Child-oriented needs assessment and program development tools are in the process of being field

tested in 25 households for 1) caregiver and child relationships, 2) health and nutrition, 3) physical development, 4) cognitive development, and 5) language development.

- Links to local community-based organizations were developed for joint proposal writing to access funding for longer-term sustainability.

PRIORITY ACTIVITIES, 2001–2002

- A home visiting program and child assessment tools will be field tested;
- A training protocol for a home visit program for community volunteers is in development;
- Recruitment, training, and monitoring of home visit volunteers will continue;
- Targeting, assessment, and volunteer training tools will be revised and published; and
- Model program activities in two to three more communities will be initiated.

PROJECT MATERIALS AND TOOLS

These will be available January 2002:

- A simple, user-friendly survey tool for rapid identification of vulnerable households;
- Simple, user-friendly tool for assessment of orphan care in households; and
- Volunteer training protocol for young orphan home-visiting programs.

TECHNICAL ASSISTANCE

The project can provide expertise for other orphans and vulnerable children projects in the following areas:

Community mobilization;

Home-based care; and

Orphan assessment and programming.

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COUNTRY:

Kenya

USAID FUNDING PERIOD:

June 1999-May 2002

PROJECT:

Community-Based Program on HIV/AIDS Care, Support, and Prevention (COPHIA)

USAID AMOUNT:

\$1,989,553

IMPLEMENTING ORGANIZATIONS:

Pathfinder International, Population Services International, Family Planning Private Sector, Kenya Rural Enterprise Program, Medical Assistance Program International, Kenya Association of Professional Counselors

PURPOSE

The Community-Based Program on HIV/AIDS Care, Support, and Prevention (COPHIA) was launched in 1999 to increase the ability of communities to identify their needs and develop and implement activities focused on HIV/AIDS-related prevention, care, and support. The project focuses on home-based care and support for persons living with HIV/AIDS and their families. To normalize home-based care, COPHIA aims to build the capacity of communities, local implementing partners, volunteers, people living with HIV/AIDS, caregivers, and orphans to enable them to develop appropriate coping mechanisms. The project has 24 sites in five districts: Busia, Kakamega, Mombasa Nairobi, and Thika. Anticipated outcomes include:

- Local implementing partners will be established and well-managed;

- Local authorities and leaders in the project's targeted districts will be trained to be sensitive to HIV/AIDS issues;
- Community structures (e.g., HIV/AIDS committees and family support teams) will be established; and
- A sustainable home-based care and support model unique to rural and peri-urban Kenya is to be established.

KEY ACCOMPLISHMENTS

As of June 2001:

- COPHIA has undertaken intensive community mobilization, including working with leaders to support the project. Approximately 650 leaders have attended one-day meetings held at the provincial, district divisional, and location levels, and 340 community meetings have been held with more than 48,500 people in attendance.

- The home-based care project has 1) trained 56 trainers, 291 community health workers, and 4,588 caregivers in home-based care; 2) provided care to 2,912 clients (881 of whom have died); and 3) visited 7,700 homes.
- Support services have included 1) training for 146 service providers in counseling, 2) training 145 religious leaders to provide psychosocial counseling, 3) training 308 people in income-generation activities, and 4) formation of 35 widow support groups and 26 orphan support groups.
- Prevention activities have included 1) formation of 25 youth groups in five districts and 2) referrals of 2,100 individuals for voluntary counseling and testing.
- Capacity building of 18 local implementing partners included training and provision of equipment.

PRIORITY ACTIVITIES, 2001–2002

- Access to credit facilities for groups trained in income-generating activities will be expanded;
- 5 voluntary counseling and testing sites will be established;
- Project activities will be extended to five more sites;
- More service providers will be trained, including community health workers and caregivers; and

- Other health care services will be introduced within home-based care services.

PROJECT MATERIALS AND TOOLS

- Home-based care curriculum;
- Home-based care hand book;
- Indicators for home-based care; and
- Home-based care kits.

TECHNICAL ASSISTANCE

The project can provide expertise for other orphans and vulnerable children projects in the following areas:

- Home-based care and
- Community mobilization.

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COUNTRY:

Kenya

USAID FUNDING PERIOD:

October 1999-September 2001

PROJECT:

Lea Toto Community-Based Program

USAID AMOUNT:

\$249,989

IMPLEMENTING ORGANIZATIONS:

Catholic Relief Services/Children of God Relief Institute in Collaboration with Nyumbani Orphanage and St Joseph's Dispensary

PURPOSE

The Lea Toto program aims to improve capacity of Kangemi community members to provide holistic care for HIV-positive orphans within a family setting. Support services are provided to the families caring for these children. By the end of the project,

- 200 families with HIV-positive orphans will have received physical care and medicines for suffering, as well as psychological and moral support.
- The community will have identified and established six sustainable community strategies to

enable the community to cope with the needs of orphans.

- The project will work to improve the capacity of the Lea Toto program to manage community-based support for orphans.

KEY ACCOMPLISHMENTS

- 3 caregiver support groups were established and are active;
- 1,100 children were tested for HIV;
- 156 children received home-based care;
- 172 caregivers received counseling;
- 172 caregivers were trained;
- 46 community health workers were trained;
- 52 families were given temporary food support;
- 50 percent of clients report good health each quarter;
- 13 caregivers were provided support for income-generating activities;
- 2 community banking groups were established;
- Ongoing networking and partnerships were created with key stakeholders;
- 2 Lea Toto staff members were trained in behavior change communication;
- 4 Lea Toto staff members were trained in counseling; and
- 4 Lea Toto staff members are currently being trained in community-based health care.

PRIORITY ACTIVITIES, 2001

- Home-based care and counseling will continue;
- Care will be linked with prevention activities;
- Care and microcredit will be integrated;
- Community mobilization and capacity building will continue; and
- Collaboration with government of Kenya health facilities will continue.

PROJECT MATERIALS AND TOOLS

- Evaluation draft report;
- Lessons learned; and
- National voluntary counseling and testing guidelines.

TECHNICAL ASSISTANCE

The project can provide expertise for other orphans and vulnerable children projects in the following areas:

- Home-based care of HIV-positive orphans, and
- Caregiver support group activities.

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Catholic Relief Services website:

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COUNTRY:

Kenya

USAID FUNDING PERIOD:

August 2000-August 2002

PROJECT:

Linking Microfinance Institutions and HIV/AIDS Activities

USAID AMOUNT:

\$300,000

IMPLEMENTING ORGANIZATIONS:

Kenya Rural Enterprise Program (K-Rep)/
Society for Women and AIDS in Kenya
(SWAK), Pathfinder/COPHIA, Family
Health International/IMPACT

PURPOSE

The Kenya Rural Enterprise Program will pilot test the Financial Services Association model to address the economic impact of HIV/AIDS on poor people in Nairobi and selected districts in western Kenya. The project will support development of new methodologies and mechanisms for financial interventions, particularly for individuals affected and infected by HIV/AIDS. The project aims to make a sustained financial difference in the lives of project participants by building family assets. Project objectives include:

- Promoting the Kenya Rural Enterprise Program's microfinance institution model in targeted areas with high HIV/AIDS prevalence;
- Establishing a line of credit for HIV/AIDS-infected and HIV-affected people;
- Training microfinance leaders, shareholders, and staff;
- Training borrowers in basic business skills and providing them with technical support; and
- Establishing an equity stake in the microfinance institutions.

Activities include business training, access to low-interest credit, and group savings schemes and are linked to psychosocial support to HIV-infected persons and their children. The Kenya Rural Enterprise Program links with Pathfinder and Family Health International/IMPACT projects in Kenya.

The Kenya Rural Enterprise Program works closely with the Society for Women and AIDS in Kenya to pilot this project in western Kenya and is responsible for:

- Providing technical skills in establishing village banks;
- Building capacity of communities to manage banks, including training in credit management;
- Implementing and managing village banks;
- Monitoring activities in the field;
- Evaluating the program from a finance perspective; and
- Facilitating linkages between communities and income-generation organizations and groups.

The Society for Women and AIDS in Kenya is responsible for:

- Identifying and mobilizing target communities to participate in the village banks;
- Sensitizing communities to include people with HIV and AIDS as well as older orphans who care for younger siblings;
- Drawing up criteria for special line of credit in the Financial Services Association procedures in consultation with Family Health International and the Kenya Rural Enterprise Program;
- Producing a work plan together with Family Health International and the Kenya Rural Enterprise Program;
- Participating in the activities in the work plan;
- Monitoring the performance of people with AIDS who participate in the program, and
- Developing a mechanism to address the legal issues surrounding orphans and vulnerable children.

The Society for Women and AIDS in Kenya will assess the situation of orphans and vulnerable children in priority community sites, undertake the development of a memory project that will help parents disclose their status to their children, promote voluntary counseling and testing, and advocate for the rights of the children against disinheritance.

To augment the piloting of the Financial Services Association model, a special line of credit will be available to persons infected and affected by HIV/AIDS. The shareholders will be trained on basic business management skills, marketing, costing, pricing, bookkeeping, cash control, and banking.

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COUNTRY:

Kenya

USAID FUNDING PERIOD:

October 2000-September 2001

PROJECT:

Community-Based Orphans and Vulnerable Children project

USAID AMOUNT:

\$200,000

IMPLEMENTING ORGANIZATIONS:

International Community for Relief of Starvation and Suffering (ICROSS),
Family Health International/IMPACT

PURPOSE

The project builds upon existing ICROSS efforts focused on community mobilization and home-based care for orphans and other children made vulnerable by AIDS in western Kenya. A microfinance component, in collaboration with Society for Women and AIDS in Kenya, mobilizes local resources for the care of children affected by AIDS. Other project activities include establishing orphans and vulnerable children committees with multisectoral representation, increasing access to education and health care for orphans and vulnerable children, and securing community placement of street and institutionalized children. Specific project objectives include:

Building the capacity of the community health workers and trainers to:

- Assist children to care for ill parents;
- Promote safer care practices to reduce children's risk of infection; and
- Help HIV/AIDS parents disclosure their status to their children.

Build the capacity of local leaders to:

- Protect children against exploitation and abuse and to help enforce the rights of the children;
- Work closely with the district AIDS control committees, constituency AIDS control committees, community-based organizations, and local non-governmental organizations to establish an effective referral network of essential services for orphans and vulnerable children; and
- Sensitize the community on the needs of orphans and other vulnerable children.

Build the capacity of communities to:

- Respond to the needs of orphans and vulnerable children through local nongovernmental organizations and community-based organizations; and
- Reduce stigma and discrimination against orphans and vulnerable children.

KEY ACCOMPLISHMENTS

- 81 community health workers have been trained and are providing home-based care and support in three areas of Western Province—Bungoma, Nzoia, and Webuye.
- 25 supervisory trainers have been trained and are working.
- A full-time medical officer is monitoring and providing technical assistance to the community health workers.

PRIORITY ACTIVITIES, 2001

- A workshop will be conducted in Bungoma with selected community health care providers, community leaders, and social/child welfare agencies;
- An orphans and vulnerable children training curriculum for community health workers and local leaders will be designed, and three training workshops (one per site) will be conducted;
- A series of meetings will be hosted with key community leaders including the spiritual, social, political, and health leaders in the communities served by community health workers to support community mobilization and strengthen referral systems;

- Linkages among the district AIDS control committees, constituency AIDS control committees, community-based organizations, local nongovernmental organizations, and other social and child welfare are being strengthened.
- Community leaders' ability to address issues facing orphans and vulnerable children such as stigma, institutional care, legal status, schooling, and nutrition are being strengthened.

PROJECT MATERIALS AND TOOLS

- Progress and outcome indicators.

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